Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ► Go to www irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

	or th	2019	calendar year, or tax year beginning 07/01, 2018, an	ad ondena		06/30, 20 19									
<u> </u>	or the	e 2010		ia enaing	D Employer idea	ntification number									
В	heck if a	pplicable	C Name of organization												
177	Addre	990	THE BRONX FREEDOM FUND, INC		26-138	5/92									
Х	chang		Doing business as												
_	Name	change	· · · · · · · · · · · · · · · · · · ·	oom/suite	E Telephone nu										
\perp	⊣	return .	P.O. BOX 750		(929) 33	5-3629									
L.	Final termi	return/ nated	City or town, state or province, country, and ZIP or foreign postal code												
L	Amen		VENICE, CA 90294		G Gross receipts	G Gross receipts \$ 555, 182.									
	Applic pendi	cation	F Name and address of principal officer ELENA WEISSMANN, DIREC	CTOR	H(a) Is this a grou	up return for Yes X No									
		•	P.O. BOX 750, VENICE, CA 90294		H(b) Are ell subord										
ī	Tax-ex	empt st	atus X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or	527	If "No," att	tach a list (see instructions)									
J	Websi	te. 🕨	WWW.BRONXFREEDOMFUND.ORG	'''	H(c) Group exem	ption number									
<u>к</u>	Form	of organ	nization X Corporation Trust Association Other	L Year of 1	formation 2009 M										
	art l		mmary	1 - 1991 91											
_			y describe the organization's mission or most significant activities THE BROI	NX FREE	DOM FUND IS	A BATI									
an.	'		D AND CASE MANAGEMENT ORGANIZATION WHOSE MISSION												
Š	Ì		NDIGENT CLIENTS AVOID THE DIRE CONSEQUENCES OF PRETRIAL DETENTION.												
Ę			theck this box if the organization discontinued its operations or disposed-of-more than 25% of its net assets												
Governance	2					1 1									
	3		er of voting members of the governing body (Part VI, line 1a)		EIVED	3 3.									
es ?	4		er of independent voting members of the governing body (Part VI, line 1b)		<u>: : : · · · · · · · · · · · · · · · · ·</u>										
Activities &	5		number of individuals employed in calendar year 2018 (Part V, line 2a) 🔯	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0 1 · 20:29 · 月日	5 10.									
Ę	6		number of volunteers (estimate if necessary)			6 5.									
⋖	7a	Total	unrelated business revenue from Part VIII, column (C), line 12	CACC	CENT LITT	7a 0.									
	b	Net u	nrelated business taxable income from Form 990-T, line 38	<u>ŲĢĻ</u>	EN, UT	7b 0.									
				_	Prior Year	Current Year									
يو	8	Contr	ibutions and grants (Part VIII, line 1h)	[783,62	538,637.									
Revenue	9	Progra	am service revenue (Part VIII, line 2g)	[0. 0.									
ě	10	Invest	tment income (Part VIII, column (A), lines 3, 4, and 7d),	[0. 111.									
Œ	11		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			0. 16,434.									
	12		revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	Г	783,62	21. 555,182.									
	13		s and similar amounts paid (Part IX, column (A), lines 1-3)			0. 0.									
	14		its paid to or for members (Part IX, column (A), line 4)			0. 0.									
un.	4.5		es, other compensation, employee benefits (Part IX, column (A), lines 5-10).		446,83	36. 421,502.									
Expenses	16a		ssional fundraising fees (Part IX, column (A), line 11e)			0. 0.									
per	h		fundraising expenses (Part IX, column (D), line 25) 8,281.												
ũ	17		expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	—— H	108,92	25. 179,905.									
	18		expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		555,76										
	19			–	227,86										
e o	 	Rever	nue less expenses Subtract line 18 from line 12		Beginning of Current										
Sis	20 21 22	T-4-1		-	1,222,69										
SSe	20		assets (Part X, line 16)	• • • • • -	198,39										
a ct	21		liabilities (Part X, line 26)												
Zű	22		ssets or fund balances Subtract line 21 from line 20		1,024,29	3. 949,123.									
	rt II		gnature Block												
true	der per e, corre	nalties o ect, and	of perjury, I declare that I have examined this return, including accompanying schedules complete, Declaration of preparer (other than officer) is based on all information of which is	s and stateme preparer has	ents, and to the best of any knowledge	my knowledge and belief, it is									
					1 10	- 10 -									
Sig	m		W			<u>,3/20</u>									
He			Signaturé of officer		Date'	,									
116	16		Elena Wessmann, Director												
			Type or print name and title												
D		Print/	Type preparer's name Preparer's signature	Date 6/19/2	2020 Check	ıf PTIN									
Paid		CAN	DICE METH Candice Meth	0/13/	Sen-employ										
	parer Only		s name ▶EISNERAMPER LLP		Firm's EIN ▶ 1	.3-1639826									
USE	Only	Firm's	address ▶750 THIRD AVENUE NEW YORK, NY 10017-2703	_	Phone no 2	212-949-8700									
Ma	y the		iscuss this return with the preparer shown above? (see instructions) .			X Yes No									
For	Pape	rwork	Reduction Act Notice, see the separate instructions.			Form 990 (2018)									
	• -				/	37 / (2010)									

JSA

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-	m 990 (2018)	Page 2
Pa	art III Statement of Program Service Accomplishments	
	' Check if Schedule O contains a response or note to any line in this Part III	. X
1	Briefly describe the organization's mission THE BRONX FREEDOM FUND IS A BAIL FUND AND CASE MANAGEMENT	
	ORGANIZATION WHOSE MISSION IS TO HELP INDIGENT CLIENTS AVOID THE DIRE	
	CONSEQUENCES OF PRETRIAL DETENTION.	
	, The state of the	
2	Did the organization undertake any significant program services during the year which were not listed on the	
_	prior Form 990 or 990-EZ?	X No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services? Types	X No
	If "Yes," describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured accomplishments for each of its three largest program services, as measured accomplishments for each of its three largest program services.	
	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to the total expenses, and revenue, if any, for each program service reported	others,
	the total expenses, and revenue, if any, for each program service reported	
_	(Code) (Finance C	
4a	(Code	
	SEE SCHEDORE O	
		~
		•
	(O. I.)	
4D	(Code) (Expenses \$ including grants of \$) (Revenue \$)	
		#"
~ -		
		
_		
4¢	(Code) (Expenses \$ including grants of \$) (Revenue \$)	
_		
4d	Other program services (Describe in Schedule O)	
4-	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ▶ 470,156.	
JSA	<u> </u>	1 (2018)

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Checklist of Required Schedules Part IV No Yes 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," Х Χ Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 Х Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) Х election in effect during the tax year? If "Yes," complete Schedule C, Part II.............. Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues. assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III . Х Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If Х Did the organization receive or hold a conservation easement, including easements to preserve open space, Х the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II........ 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," Х 8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or Х Did the organization, directly or through a related organization, hold assets in temporarily restricted 10 Х endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V. If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 11 VII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," 11a b Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more Х 11b c Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more Х d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets Х 11d Χ e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f 12 a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Х 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If Х "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional $\,$. 12b Х Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E. Х 14a Did the organization maintain an office, employees, or agents outside of the United States?......... b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate Χ foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or Х 15 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other Χ 16 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Χ 17 Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions).......... 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Х 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? Х 19 Χ 20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or Х domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

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Pari	Checklist of Required Schedules (continued)			
	,		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			v
•	employees? If "Yes," complete Schedule J	23		<u> </u>
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		х
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
Ŭ	to defease any tax-exempt bonds?	24c		
đ	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			v
20	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
9	Part IV instructions for applicable filing thresholds, conditions, and exceptions). A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X '
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	20a		
	Schedule L, Part IV	28ь		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		<u>X</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	24		Х
25.0	or IV, and Part V, line 1	34 35a		$\frac{\lambda}{X}$
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	334		<u> </u>
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		_ X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	L
Pari				
	Check if Schedule O contains a response or note to any line in this Part V			لملن
_			Yes	No
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1		
	Enter the number of Forms W 20 metaded in the 1d Enter of infortapplicable	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Γ.	Х	
	reportable gaining (gainbing) winnings to prize williers	1c Form		(2018)

Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			,
	(*	Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 10		-	
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,	<u> </u>		
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	i	Х
b	If "Yes," enter the name of the foreign country			
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	- / -	X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization			
	solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		i	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			}
	and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c	ŀ	Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		Х
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.	7h		Х
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter		ł	
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities [10b]		j	İ
11	Section 501(c)(12) organizations. Enter		1	
а	Gross income from members or shareholders			1
þ	Gross income from other sources (Do not net amounts due or paid to other sources		1]
	against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year [12b]			l
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			}
b	Enter the amount of reserves the organization is required to maintain by the states in which			ļ
	the organization is licensed to issue qualified health plans		- 1	i
	Enter the amount of reserves on hand			ļ
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O · · · · · ·	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see instructions and file Form 4720, Schedule N			لــــا
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O			!

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.			
	Check' if Schedule O contains a response or note to any line in this Part VI		Struc	X
Sect	ion A. Governing Body and Management			1
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar		· ·	
	committee, explain in Schedule O			
	Enter the number of voting members included in line 1a, above, who are independent Lab	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	2		X
•	any other officer, director, trustee, or key employee?			
3	Did the organization delegate control over management duties customarily performed by or under the direct	3		х
4	supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
-	stockholders, or persons other than the governing body?	7b		Χ .
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			ł
	the year by the following			لــــــا
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	٠X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			.,
<u> </u>	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Secu	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	Coae	Yes	No
		10a	168	X
	Did the organization have local chapters, branches, or affiliates?	iva	,	^
a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10ь	ľ	
44-	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	11a	х	
11a b	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?			
12a	Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
-	rise to conflicts?	12b	х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
-	describe in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			i
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	46-		л Х
	with a taxable entity during the year?	16a	١.	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			;
	organization's exempt status with respect to such arrangements?	16b		لـــــــــــــــــــــــــــــــــــــ
Sect	on C. Disclosure	1.00	·	
17	List the states with which a copy of this Form 990 is required to be filed ▶ NY /			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-1	' (Sec	tion 5	01(c)
. •	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply	,550		(0
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest	policy	, and
	financial statements available to the public during the tax year	- 1		
20	State the name, address, and telephone number of the person who possesses the organization's books and record ELENA WEISSMANN P O BOX 750 VENICE, CA 90294	s 🕨		
	ELENA WEISSMANN P O BOX 750 VENICE, CA 90294 929-335-3629		000	
		Form	990	(2018)

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Part VII	Compensation	of	Officers,	Directors,	Trustees,	Key	Employees,	Highest	Compensated	Employees,	and
	Independent Co	ontr	actors								•

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unle: er an	Pos heck ss pe	erson	than or/trusi et is or/trusi e mployee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1)DAVID FEIGE	1.00									
CHAIR	0.	Х		Х				0.	0.	0.
(2)BRIAN CHAPMAN	1.00]					1			
SECRETARY	0.	Х		X			$oxed{oxed}$	0.	0.	0.
(3)DAVID SOLOMON	1.00						1			
TREASURER	0.	X		X	ļ			0.	0.	0.
(4)ZOE TOWNS	1.00									
DIRECTOR (UNTIL 4/19/19)	0.	Х	_					0.	0.	0.
(5)MICHAEL HERSON	1.00						ļ			
DIRECTOR (UNTIL 4/19/19)	0.	Х					L	0.	0.	0.
(6)ELENA WEISSMANN	35.00								_	
DIRECTOR	0.	<u> </u>		X			_	58,269.	0.	9,477.
(8)										
(9)										
(10)										
(11)										
(12)										
(13)			_				-		<u>-</u> .	<u> </u>
(14)										

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Part VII Section A. Officers, Directors, Tru	ıstees, Ke	y En	plo	ye	es,	and I	lig	hest Compensat	ed Employees	(continued)
' (A) Name and title	(B) Average hours per week (list any hours for	(do r box,	not cl unles	Pos neck ss pe	C) ation more irson lirect	e than o	ne an ee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated
	related organizations below dotted fine)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC	from the organization and related organizations
to Sub-total continuation sheets to Part VII, Sed Total (add lines 1b and 1c)	ection A	 <u></u>	· ·	· ·	· ·		> >	58,269. 0. 58,269.	0 0	. 0.
Total number of individuals (including but not reportable compensation from the organization)		hose 0.		d a	bove	e) who	re	ceived more than	\$100,000 of	
3 Did the organization list any former office employee on line 1a? If "Yes," complete Schedul	er, directo ule J for suc	or, or ch ind	tru ividi	ıste ual	e,	key e	emp	oloyee, or highes	t compensated	Yes No
4 For any individual listed on line 1a, is the sorganization and related organizations greated individual	eater than	\$15	0,0	007) If	"Yes	,"	complete Schedu	le J for such	4 X
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Ye	accrue co	mpen	sati	on 1	fron	any	un	related organization	on or individual	5 X
Section B. Independent Contractors									<u>_</u>	
1 Complete this table for your five highest com- compensation from the organization. Report of year.										
(A) Name and business add	ress							(B) Description of se	ervices	(C) Compensation
							\downarrow			
							<u> </u>			
2 Total number of independent contractors (in		.4				41				

more than \$100,000 in compensation from the organization ▶

0.

Part VIII Statement of Revenue

	Check if Schedule O contains a response or note to any line in this Part VIII											
				(A) ',' Total revenue	(B) Related or exempt function revenue	(C) ' " Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514					
nts nts	Į1а	Federated campaigns 1a	<u> </u>									
s, Grants Amounts	ь	Membership dues										
A L	С	Fundraising events 1c	, , ,				14 May 14 14 15 15					
<u>a</u>	í a	Related organizations 1d										
Sim's,	e	Government grants (contributions) 1e					*					
er is	f	All other contributions, gifts, grants,	*									
ë 5		and similar amounts not included above . 1f	538,637									
Contributions, Gifts, and Other Similar Ar	g	Noncash contributions included in lines 1a-1f \$										
	h	Total. Add lines 1a-1f	<u></u>	538,637.	2.0000000000000000000000000000000000000							
Ę		į.	Business Code	Martin Estate A								
eve	2a				•	*	-					
e R	ь				,							
ξ	С	-		`	·	·						
Se	ď d					,	•					
E E	e	·			•		1					
Program Service Revenue	f	All other program service revenue	, T	· /	arstrum tool, it states and its 72 and too	Company Change of the state of the Season	es tel avalera Samuel I					
<u>-Ē</u>	9	Total. Add lines 2a-2f :	<u> ▶</u>	- 0			NEW TOTAL					
	3	Investment income (including dividen	ids, interest,		,		£ 42					
	!	and other similar amounts)	· · · · · · · •	, , 111,	•	,	111					
	4	Income from investment of tax-exempt bond	•	0	٠, ٠	, -	*					
	5	Royalties	(ii) Personal	O	2000 (1901 1901 1900 1900 1900 1900 1900	. OPEN AND STORY OF AN AND AND AND AND AND AND AND AND AND	Salter and the salt and the					
		(i) Real	(ii) Feisuliai									
	6a	Gross rents				Alloward Services						
	b	Less rental expenses										
	С	Rental income or (loss)	<u> </u>	AND THE RESIDENCE	THE CONTROL OF THE CO	SON AND AND VIOLE	AMMAE VERGERAM					
	_d	Net rental income or (loss)	(ii) Other	0	"neks tig of the an extension to the	Alter Aller Aller Article Aller	17 35 E322 (***********************************					
	7a	Gross amount from sales or	(11) Guilei									
-		assets other than inventory	-									
	b	Less cost or other basis			ry H.							
		and sales expenses										
	C	Gain or (loss)			A CONTRACTOR OF THE STATE OF TH	Local Children Car Car Car	<u> </u>					
	d	Net gain or (loss)	· · · · · · · · · · · · · · · · · · ·	Continue that he	\$540 MEN CARESHIP A SAIL		Line and the					
enne	8a	Gross income from fundraising										
Ver	١.	events (not including \$										
æ	'	of contributions reported on line 1c)										
Other Rev		See Part IV, line 18 a	0									
ō	b	Less direct expenses b Net income or (loss) from fundraising events		0		DESCRIPTION OF THE PROPERTY OF	Section and the section of the secti					
		Gross income from gaming activities					E THE WATER					
	9a	See Part IV, line 19 a	ò									
	[Less direct expenses b	١ .									
ŧ	b	Net income or (loss) from gaming activities.		0	THE CONTROL OF THE PERSON NAMED IN COLUMN TO	(MCA 72 DOLLAR MR AND COMMON ALL LAND COMMON LINES AND CO	2					
	10a	Gross sales of inventory, less				77 28 27 47 47 47 47 47 47 47 47 47 47 47 47 47	STATE AND A STATE A					
	IVa	returns and allowances a	0									
	ь	Less cost of goods sold b	1									
	_ c	Net income or (loss) from sales of inventory.		0	A STATE OF THE STA							
		Miscellaneous Revenue	Business Code									
	11a	MISC REVENUE- BAIL FORFEITURES	900099	16,434	16,434	* 1						
,	ь		-		,	• ;						
	. c					2						
	d	All other revenue										
	e	Total. Add lines 11a-11d		** 16,434	POPELLY STEELS							
	12	Total revenue. See instructions		,555,182	16,434	- 1	¹⁷ 111					
		,	1				Form 990 (2018)					

 λ_{ij}^{ij}

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

	' Check if Schedule O contains a resp	onse or note to any lir	ne in this Part IX		
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistânce to domestic organizations				
	and domestic governments See Part IV, line 21	0.			
2	Grants and other assistance to domestic individuals See Part IV, line 22 :	0.			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	0.			
4	Benefits paid to or for members	0.			CASSEMANT EN LESSE
5	Compensation of current officers, directors,				
	trustees, and key employees	68,536.	48,634.	12,954.	6,948.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	i	,		
	persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages	297,901.	297,901.		
	Pension plan accruals and contributions (include			,	
	section 401(k) and 403(b) employer contributions)	0.		*	,
9	Other employee benefits '	21,861.	21,861.		
10	Payroll taxes	33,204.	31,534.	1,113.	1. 557.
11	Fees for services (non-employees)				\ \frac{\frac{1}{2}}{2}
а	Management	0.		r	`-i^ a_
	Legal	0.		-	- ' '
c	Accounting	102,317.		102,317.	•
d	Lobbying	941.		941.	<u>,</u>
е	Professional fundraising services See Part IV, line 17.		地。自用機能是由門灣	等的情報維持的	. ,
f	Investment management fees	0.			À
g	Other (If line 11g amount exceeds 10% of line 25, column	,		4 000	, , ,
	(A) amount, list line 11g expenses on Schedule O)	10,726.	6,629.	4,097.	,, ,
12	Advertising and promotion	0.	11 504	400	ê 1202
13	Office expenses	12,128.	11,524.	402.	<i>i</i> 202.
-14	Information technology	0.			
15	Royalties,	35,543.	34,112.	954.	477.
	Occupancy	33,543.	3,604.	334.	4//.
	-Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			-
10	Conferences, conventions, and meetings	0.		,	- , **
	Interest	0.	,		
21	Payments to affiliates	0.			
22		1,131.	1,075.	37.	- 19.
	Insurance	4,662.	4,429.	155.	. 78,.
24			1500 A 456 C 100 10 A 5		
	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				S1400 44 35 54
а	BAIL EXPENSES	8,853.	8,853.		
b				,	
С					
d				-	
е	All other expenses				F
	Total functional expenses. Add lines 1 through 24e	601,407.	470,156.	122,970.	8,281.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation Check here following SOP 98-2 (ASC 958-720)	0.			7

Page 11

Balance Sheet Part X (A) (B) Beginning of year End of year 323,407. 1 330,456. Savings and temporary cash investments 0. 110. 2 2 Pledges and grants receivable, net 0. 0. 3 3 890,323. 791,677. 4 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L. Loans and other receivables from other disqualified persons (as defined under section 0. 0. 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary Ö. organizations (see instructions) Complete Part II of Schedule L 0. 6 0. 0. 7 Ô. 0. 8 0. 9 0. 10a Land, buildings, and equipment cost or 5.115. other basis Complete Part VI of Schedule D 10a 1,764. 3,539. b Less. accumulated depreciation. 10b 10c 0. 0. 11 Investments - publicly traded securities 11 Ō. 0. 12 13 Investments - program-related See Part IV, line 11 Ō. 0. 13 0. 0. 14 14 7,200. **15** 7,200. 15 1,222,694. 1,132,982. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 28,399. 13,857. Accounts payable and accrued expenses........ 17 17 0. Ō. 18 18 0. 0. 19 19 0. 0. 20 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 0. 21 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and 0. 0. 22 Secured mortgages and notes payable to unrelated third parties 0. 0. 23 23 Unsecured notes and loans payable to unrelated third parties..... 170,000. 170,000. 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X. 0. 0. 25 Total liabilities. Add lines 17 through 25......... 198, 399. **26** 183,857. Organizations that follow SFAS 117 (ASC 958), check here > X and complete lines 27 through 29, and lines 33 and 34. Balances 27 875,102. 793,651. 27 149,193. 155,474. 28 28 Ō. Fund 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here þ complete lines 30 through 34. Capital stock or trust principal, or current funds 30 Assets 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 32 32 Net 1,024,295. 949,125. 33 33 1,222,694. 1,132,982. Total liabilities and net assets/fund balances........ 34

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ▶ Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer Identification number

THE	. В	RONX FREEDOM FUND,	INC				26-13857	92						
Pai	tΙ	Reason for Public Cha	rity Status (All o	organizations must o	omplet	e this pa	art.) See instructions	3.						
The	org	anization is not a private fou	ndation because it	is (For lines 1 through	gh 12, ch	eck only	one box)							
1		A church, convention of chi	urches, or associat	tion of churches desc	ribed in s	ection 1	70(b)(1)(A)(i). 💉🗸	١.						
2		A school described in secti	on 170(b)(1)(A)(ii)	. (Attach Schedule E	(Form 99	90 or 990)-EZ)) {	χ .						
3		A hospital or a cooperative	hospital service o	rganization described	n sectio	n 170(b)	(1)(A)(iii).	\						
4		A medical research organia	zation opérated in	conjunction with a hos	spital de	scribed in	n section 170(b)(1)(A)(iii). Enter the						
		hospital's name, city, and s	tate											
5		An organization operated	for the benefit of	a college or universit	y owner	d or ope	rated by a governme	ental unit described in						
		section 170(b)(1)(A)(iv). (0	Complete Part II)											
6		A federal, state, or local go	federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).											
7	An organization that normally receives a substantial part of its support from a governmental unit or from the general public													
	described in section 170(b)(1)(A)(vi). (Complete Part II)													
8		A community trust describe	ed in section 170(b)(1)(A)(vi). (Complete	Part II)									
9		An agricultural research or	ganization describe	ed in section 170(b)(1)(A)(ix)	operated	I in conjunction with a	land-grant college						
		or university or a non-land-												
		university		,	•			Ü						
10	An organization that normally receives (1) more than 331/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 331/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III.)													
11		An organization organized	· · · · · · · · · · · · · · · · · · ·	•	-									
12		An organization organized	· ·	·				•						
	of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3).													
	_	Check the box in lines 12a t	through 12d that d	escribes the type of s	upporting	g organiz	zation and complete li	nes 12e, 12f, and 12g						
а	L	Type I. A supporting org	anızatıon operated	, supervised, or contr	olled by	its supp	orted organization(s),	typically by giving						
		the supported organization	on(s) the power to	regularly appoint or e	lect a m	ajority of	the directors or truste	ees of the						
		supporting organization `	You must complet	te Part IV, Sections A	and B.									
b	L	Type II. A supporting org	anızatıon supervis	ed or controlled in co	nnection	with its	supported organization	ion(s), by having						
		control or management of	of the supporting o	organization vested in	the sam	e persor	ns that control or mar	nage the supported						
	_	organization(s) You must	t complete Part IV	, Sections A and C.										
С	L	Type III functionally inte	grated. A supporti	ng organization opera	ited in c	onnectio	n with, and functiona	lly integrated with,						
	_	its supported organization	n(s) (see instruction	ns) You must comple	te Part I	V, Section	ons A, D, and E	•						
d	L	Type III non-functionally	integrated. A sup	porting organization of	perated	in conne	ection with its suppor	rted organization(s)						
		that is not functionally into	-		-		•	d an attentiveness						
	_	requirement (see instruct	ions) You must co	omplete Part IV, Sect	ions A a	nd D, an	d Part V.							
e	L	Check this box if the orga	anization received	a written determinatio	n from t	he IRS tl	hat it is a Type I, Type	II, Type III						
		functionally integrated, or	Type III non-funct	ionally integrated sup	porting o	organizat	ion							
f		iter the number of supported	•											
g	Pro	ovide the following informati	on about the suppo	orted organization(s)	,									
	(i) N	lame of supported organization	(ii) EIN	(ui) Type of organization (described on lines 1-10		organization	(v) Amount of monetary	(vi) Amount of other support (see						
				above (see instructions))		ur governing ment?	support (see instructions)	instructions)						
					Yes	No								
(A)														
(B)														
(C)						-								
 (D)														
					 		-							
(E) 					<u> </u>	<u> </u>								

Total

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support					<u> </u>	
Cale	ndar year (or fiscal year beginning in). ▶	· (a) 2014 · ·	(b) 2015	(c) 2016_	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	46,826	304,592	776,884.	783,621	538,637	2,450,560
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	,					0
3	The value of services or facilities furnished by a governmental unit to the organization without charge	,					0
4	Total. Add lines 1 through 3	46,826	304,592	776,884.	783,621	538,637	2,450,560
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)	美工教》的概念	主意比较的特殊		海洲流河	建筑	345,149
6	Public support. Subtract line 5 from line 4	松 "然过的"	北层的一家公司公司	SHOW WENT	等。	的數學的	2,105,411
Sec	tion B. Total Support						ř.
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	46,826	304,592.	776,884.	783,621	538,637	2,450,560
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	. 6	423.	-		111	74) 540
9	Net income from unrelated business activities, whether or not the business is regularly carried on	-					ē 0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) . ATCH. 1			10,467.		16,434	
11	Total support. Add lines 7 through 10	学型设置证据的	科学/文学科				2,478,001
12	Gross receipts from related activities, etc. (see instructions) .				12	
13	First five years. If the Form 990 is to organization, check this box and stop here	<u> </u>					
₋ <u>Sec</u>	tion C. Computation of Public Sup						
14	Public support percentage for 2018 (I			•	•	r	84.96%
15	Public support percentage from 2017						80.33 %
16a	331/3% support test - 2018. If the or	-					
	box and stop here. The organization of					,	▶ X
b	33 1/3 % support test - 2017. If the or	~					
47-	this box and stop here . The organization	•		-			
1/a	10%-facts-and-circumstances test - 10% or more, and if the organization						
ъ, b	Part VI how the organization meets organization	the "facts-and-control of the "facts and control of the organization meets the "	circumstances" t ganization did n s the "facts-and facts-and-circur	est. The organi ot check a box d-circumstances nstances" test	zation qualifies on line 13, 16 " test, check ti The organization	as a publicly so a, 16b, or 17a, his box and ste n qualifies as a	upported ▶ □ and line op here. publicly
18	supported organization	did not check a	a box on line 13	, 16a, <u>1</u> 6b, 17a	, or 17b, check	this box and see	
$\overline{}$		 				abadula A /Farm O	

Page 3

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	The organization rais to que	anny dilaci tilo	teoto noted be		ompicte r art i	· <i>)</i>	
<u>Sec</u>	tion A. Pùblic Support					/	
Cale	ndar year (or\fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e)/2018	(f) Total
1	Gifts, grants, contributions, and membership fees						<u> </u>
	received (Do not include any "unusual grants ")					/	
2	Gross receipts from admissions, merchandise				-	/	
	sold or services performed, or facilities					/	
	furnished in any activity that is related to the				· /		
	organization's tax-exempt purpose					_	
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513 .						
4	Tax revenues levied \(\sqrt{for} \) the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or faculities			/			
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons			/			•
b	Amounts included on lines 2 and 3						
	received from other than disqualified		/				
	persons that exceed the greater of \$5,000	, \		j			
	or 1% of the amount on line 13 for the year		/				
	Add lines 7a and 7b	· \	/				
8	Public support. (Subtract line 7c from	N		-			
	line 6)					<u> </u>	
	tion B. Total Support		X				
Caler	ndar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
10 a	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties, and income from similar						
	sources						
ь	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b	1					
11	Net income from unrelated business/	,					
• •	activities not included in line 10b,			<u> </u>			
	whether or not the business is regularly						
	carried on						_ :
12	Other income Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12) / [<u> </u>	
14	First five years. If the Form 990 is for					`	
	organization, check this box and stop here.	<u> </u>	· · · · · · · · ·	<u> </u>		<u>\</u>	<u></u>
Sec	<u>tion C. Computatión of Public Sup</u>						
15	Public support percentage for 2018 (line 8,		•			. 15	%
16	Public support percentage from 2017 Sche	dule A, Part III, lin	ne 15	<u> </u>		16	%
<u>Sec</u>	tion D. Computation of Investment	t Income Perc	entage	_			
17	Investment income percentage for 2018 (lin	ne 10c, column (f), divided by line	13, column (f))		17	%
18	Investment income percentage from 2017	Schedule A, Part	III, line 17			18	\ %
19 a	33 1/3% support tests - 2018. If the org					e than 331/3%, a	and`line
	17 is not more than 331/3%, check thi	•					`
b	331/3% support tests - 2017. If the orga						` —
	line 18 is not more than 331/3%, check						· —
20	Private foundation. If the organization		•	•		• • • • • • • • • • • • • • • • • • • •	
							

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

COL	on A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated If designated by class or purpose, describe the designation. If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination	3b		
C	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	46		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control?	5b 5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which	9a 		
С	the supporting organization had an interest? If "Yes," provide detail in Part VI . Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit	9c		
10 a	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI . Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

 -				
26-1385	792		Page 5	
			aye J	ı
•		Yes	No	
(6)			1	
ın (b) and (c)	11a		3	
	11b			
detail in Part VI.	11c			
		V	A1 -	
		Yes	No	
power to times during the		*		
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g the supported year	1			
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explain in Part				
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· · · · · ·			L	
		Yes	No	
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l how control I or managed			j	
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th month of the		Yes	No	
led during the prior n, and (iii) copies of				
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by the supported lain in Part VI how				
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	3			
uring the year (see ins	tructi	ons)		
pelow				
government entity (see	ınstru	ctions)		
		Yes	No	
empt purposes of				
VI identify				
purposes, tion determined	<u> </u>			
	2a			
nent, one or more				
n In Part VI the In these				
	,			

Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			1
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
Casti	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		L
Secti	on B. Type I Supporting Organizations			
	ſ		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	- 1	*	{
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
_	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			[
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			1
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s)	1		3
Secti	on D. All Type III Supporting Organizations			<u> </u>
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior			!
	tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of			
	the organization's governing documents in effect on the date of notification, to the extent not previously			
	provided?	1		L.,
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)			
•	- //	2	-	-
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			1
	supported organizations played in this regard	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations		-	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	tructi	ons)	
а	The organization satisfied the Activities Test. Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
С	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	ınstru		
2	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
h	·			1
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		ļ
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	<u>3b</u> _		Щ_

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	nizati	ons	
1 Check here if the organization satisfied the Integral Part Test as a qualifying	g trusi	t on Nov 20, 1970 (explain	ın Part VI) See
instructions. All other Type III non-functionally integrated supporting organization	zation	s must complete Sections	s A through E.
Section A - Adjusted Net Income	_	(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		***
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7	•	- •
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see	1	per hamile has	10 3 p 20 1
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a	,	
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		1.
d Total (add lines 1a, 1b, and 1c)	1d		1,
e Discount claimed for blockage or other		ar a	ا مر آو ريالليسو بر ه و
factors (explain in detail in Part VI)		an armametra per	200
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			÷.
see instructions)	4	,	4
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 035	6		
7 Recoveries of prior-year distributions	7		***
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount		The second secon	Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	4 6 7 1 1 1 2	•
2 Enter 85% of line 1	2	, NE 7	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	· 10.770.00000000000000000000000000000000	
4 Enter greater of line 2 or line 3	4	ほ .	
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
7 Check here if the current year is the organization's first as a non-functionally	y integ	grated Type III supporting of	organization (see

Schedule A (Form 990 or 990-EZ) 2018

instructions)

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Part	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)						
Secti	on D - Distributions		,	· Current Year			
1	Amounts paid to supported organizations to accomplish ex	kempt purposes	٠ / ر د				
_ 2	Amounts paid to perform activity that directly furthers exer	npt purposes of support	ed ·				
	organizations, in excess of income from activity	organizations, in excess of income from activity					
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organi	zations	,			
4	Amounts paid to acquire exempt-use assets			-			
5	Qualified set-aside amounts (prior IRS approval required)	•					
6	Other distributions (describe in Part VI) See instructions						
7	Total annual distributions. Add lines 1 through 6		•	,			
8	Distributions to attentive supported organizations to which	the organization is resp	onsive	•)			
	(provide details in Part VI). See instructions						
9	Distributable amount for 2018 from Section C, line 6	,		,			
10	Line 8 amount divided by line 9 amount	· · · · · · · · · · · · · · · · · · ·		•			
		(i)	(ii)	(iii)			
	Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2018	Distributable Amount for 2018			
	. '	Search C. T. W. dert P. S. Land Ca. J. L. V. Son. Politica. CC		Aniount for 2018			
1	Distributable amount for 2018 from Section C, line 6			Wall and the transfer of the t			
2	Underdistributions, if any, for years prior to 2018		<u> </u>				
^	(reasonable cause required - explain in Part VI) See						
	instructions		d same heles and the same same same same	Little San Service (1985)			
3	Excess distributions carryover, if any, to 2018						
a	From 2013	The state of the s	THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON OF THE PE				
b	From 2014		Section 10 and 1				
<u>c</u>	From 2015	CATTERNATE TO THE STATE OF THE	The state of the state of the state of				
d	From 2016						
<u>e</u>	From 2017						
f	Total of lines 3a through e	businessanders and and and a supply and					
<u>g</u>	Applied to underdistributions of prior years		G ** To the distance of the first and the				
<u>n</u>	Applied to 2018 distributable amount	William State of the Control of the	NETTER COME STATE OF THE STATE	S.A. Pricewood Principles of the Description of the Committee of the C			
!-	Carryover from 2013 not applied (see instructions)		TO THE COMMENSOR OF THE PROPERTY AND THE COMMENSOR OF THE	100000000000000000000000000000000000000			
 _	Remainder Subtract-lines 3g, 3h, and 3i from 3f		Comment of the second of the s	Property States and St			
4	Distributions for 2018 from						
	Section D, line 7. \$		CASSACTION OF STREET				
a_	Applied to underdistributions of prior years	Property of the state of the st	SECONDARY SERVICE SECTION SECTION SECURITY	AND THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRE			
<u>b</u>	Applied to 2018 distributable amount			A*, 3,			
<u>C</u>	Remainder Subtract lines 4a and 4b from 4	CHIENNER STERRE COLORES					
5	Remaining underdistributions for years prior to 2018, if		,				
	any Subtract lines 3g and 4a from line 2 For result		. ,				
<u>.</u>	greater than zero, explain in Part VI See instructions	24.74 2002-1304-140-140-140-140-140-140-140-140-140-1	6. 4888-3885 1080 ° 4210-3739 (Sistem 146)				
6	Remaining underdistributions for 2018 Subtract lines 3h						
	and 4b from line 1. For result greater than zero, explain in						
<u> </u>	Part VI. See instructions		236 2012 2013	CONTRACTOR SECRETARION SERVICES			
7	Excess distributions carryover to 2019. Add lines 3j						
	and 4c Breakdown of line 7						
8		TANTANINANANANANANANANANANANANANANANANAN		PART OF THE PART OF			
<u>a</u>	Excess from 2015	THE STATE OF STREET AND A STREET OF THE STREET		5227 to 1927 to 1922 t			
<u>b</u>	Excess from 2015	THE TALL SECTION OF THE SECTION OF T		TOWN HE WASHING AND THE			
<u>c</u>	Excess from 2016	THE WASHINGTON TO BE SEEN TO SEE THE SECOND OF THE SECOND	TO THE THE STATE OF THE STATE O	CHARLEST CONTRACTOR OF THE CON			
d_	Excess from 2017	TATELO STATES OF THE SECOND	THE PROPERTY OF THE PROPERTY O	A SECURITY OF THE SECURITY OF			
e_	Excess from 2018	EANS SANCTION AND ACCOUNTS OF AND ACCOUNTS		1700年1月11日本教育學科學科學			

chedule A (Form 990 or 990-EZ) 2018

Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b; Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE A, PART-II -	- OTHER INCO	MF.			ATTACHMENT 1	
·						
DESCRIPTION	2014	2015	2016	2017	2018	TOTAL
MISC REVENUE- BAIL FORFEITURES			٠,		16,434	16,434
TOTALS					16,434	16,434

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

		that have filed Form 5/68 (election un			
•	Section 501(c)(3) organizations	that have NOT filed Form 5768 (election	on under section 501(h	i)) Complete Part II-B Do no	ot complete Part II-A
Tax)	(see separate instructions), the		Tax) (see separate i	nstructions) or Form 990-	EZ, Part V, line 35c (Prox
	Section 501(c)(4), (5), or (6) org	anizations Complete Part III			
	e of organization			Employer ide	ntification number
THE	BRONX FREEDOM FUND			26-138	
Pai	t I-A Complete if the o	organization is exempt under	section 501(c) or	is a section 527 orga	nization.
1	Provide a description of the	organization's direct and indirect	political campaign a	ctivities in Part IV (see in	nstructions for
	definition of "political campa	aign activities")		•	
2	Political campaign activity e	xpenditures (see instructions)		▶ \$	
3		campaign activities (see instructio			
Par	t I-B Complete if the o	organization is exempt under	section 501(c)(3).		
1	Enter the amount of any exc	cise tax incurred by the organization	n under section 495	55 ▶ \$	
2	Enter the amount of any exc	cise tax incurred by organization m	anagers under sect	ion 4955 ▶ \$	
3	If the organization incurred	a section 4955 tax, did it file Form	4720 for this year?		. Yes No
4a					
	If "Yes," describe in Part IV				
Par	t I-C Complete if the c	organization is exempt under	section 501(c), ex	xcept section 501(c)(3).
1	Enter the amount directly e	expended by the filing organization	n for section 527 e	xempt function	
2		ng organization's funds contributed			
		es			
3		enditures Add lines 1 and 2 En			
4	Did the filing organization fil	e Form 1120-POL for this year?			. Yes No
5	Enter the names, addresses	and employer identification numb	er (EIN) of all section	on 527 political organiza	ations to which the filing
	organization made payment	s For each organization listed, er	iter the amount pai	d from the filing organiz	ation's funds. Also enter
	the amount of political conf	tributions received that were prom	iptly and directly de	elivered to a separate po	olitical organization, such
		nd or a political action committee (PAC) if additional sp	pace is needed, provide i	ntormation in Part IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds If none, enter -0-	contributions received and
				Turius il none, enter -0-	promptly and directly delivered to a separate
					political organization If
					none, enter -0-
(1)	, , , , , , , , , , , , , , , , , , , ,				
• •			1		
(2)					
• •			1		
(3)					
			1		
(4)				-	
			1		
(5)					
(6)					,
	•		1		
		·	*		

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2018

Schedule C (Form 990 or 990-EZ) 2018	THE BROWN FRE	EDOM FUND, INC		26-1	.383/92 Page Z
Part II-A Complete if the orginal section 501(h)).	ganization is exe	mpt under section	501(c)(3) and	filed Form 5768 (ele	ction under
A Check ► if the filing organia address, EIN, exp		affiliated group (and excess lobbying expe		nch affiliated group men	iber's name,
B Check ► if the filing organi:	zation checked box	A and "limited contro	l" provisions app	ly	
Limits (The term "expendit	on Lobbying Exper ures" means amou) .	(a) Filing organization's totals	(b) Affiliated group totals
1a. Total lobbying expenditures to	influence public opir	ion (grass roots lobb	ying)		
b Total lobbying expenditures to	•				
c Total lobbying expenditures (ac	- *				
d Other exempt purpose expendi	tures		[
e Total exempt purpose expendit	ures (add lines 1c ai	nd 1d):			
f Lobbying nontaxable amount.	Enter the amount	from the following	table in both		
columns		ŭ		٠,	
If the amount on line 1e, column (a) or (b) is: The lobbyi	no nontaxable amount	ıs.		
Not over \$500,000		amount on line 1e			
Over \$500,000 but not over \$1,000		lus 15% of the excess	over \$500,000		
Over \$1,000,000 but not over \$1,5		lus 10% of the excess	- I -		
Over \$1,500,000 but not over \$17		lus 5% of the excess of	1189		
Over \$17,000,000	\$1,000,000				A CONTRACTOR
g Grassroots nontaxable amount				200 property (100 contract of 100 contract of	
h Subtract line 1g from line 1a If					
i Subtract line 1f from line 1c. If			_	•	, ,
j If there is an amount other th				tion file Form 4720	<u>*</u>
reporting section 4911 tax for	•				Yes No
		raging Period Under			,
(Some organizations tha				ete all of the five colun	nns below."
· _ ·		te instructions for I	-		•
	Lobbying Expe	nditures During 4-Ye	ear Averaging Per	riod	
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount	, -	,	1		**
b Lobbying ceiling amount (150% of line 2a, column (e))	AL PROPERTY VICES				
c Total lobbying expenditures					
d Grassroots nontaxable amount					* 1
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures			e	1 .	

Schedule C (Form 990 or 990-EZ) 2018

	THE BRONX FREEDOM FUND, INC		26	-138	5792	•	_ ^
_	t II-B Complete if the organization is exempt under section 501(c)(3) and has NC (election under section 501(h)).	T file	d For	57€	8		Page 3
		(;	a)		(b))	
	each "Yes," response on lines 1a through 11 below, provide in Part IV a detailed cription of the lobbying activity.	Yes	No		Amou	unt	
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or						
а	referendum, through the use of Volunteers?					ī	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?.	X	,				` .
С	Media advertisements?		Х				
d	Mailings to members, legislators, or the public?		Х				
е	Publications, or published or broadcast statements?	Х					205
f	Grants to other organizations for lobbying purposes?		Х				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		Х				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	X					736
1	Other activities?	<u> </u>	Х				
j	Total Add lines 1c through 1:						941
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х				
b	If "Yes," enter the amount of any tax incurred under section 4912						
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			<u> </u>			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?						
Pa	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6).	(c)(5)	, or s	ectior	1		
						Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from				3		
Pa	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501						
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No,"	OR (b) Pa	rt III-A	., line	3, is	
	answered "Yes."						_
1	Dues, assessments and similar amounts from members			1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amo	unts	of				
	political expenses for which the section 527(f) tax was paid).		ŀ			•	
а	Current year			2a			
b	Carryover from last year			2b			
C	Total			2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du	es		3		_	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion	of th	ne	Ì			
	excess does the organization agree to carryover to the reasonable estimate of nondeductible I	obbyir	ng i				
	and political expenditure next year?			4			
5_	Taxable amount of lobbying and political expenditures (see instructions)	· · ·		5	*		
	rt IV Supplemental Information						
	vide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliate see instructions); and Part II-B, line 1. Also, complete this part for any additional information	a gro	up list)	, Part	II-A, lir	nes 1	and
SCI	HEDULE C, PART II-B, LINES 1B, 1E, 1G AND 1H						
EM	PLOYEES OF THE BRONX FREEDOM FUND, JOINED PRESS CONFERENCE IN SUPP	ORT					
OF	BAIL REFORM PROPOSAL, OFFERED OPINIONS TO LEGISLATORS WORKING ON						

Schedule C (Form 990 or 990-EZ) 2018

POTENTIAL LEGISLATION.

LEGISLATION AND TESTIFIED BEFORE LOCAL GOVERNING COUNCILS REGARDING

Schedule C (Form 990 or 990-EZ) 2018

Page 4

Part IV Supplemental Information (continued)

SCHEDULE D (Form 990)

Supplemental Financial Statements
► Complete if the organization answered "Yes" on Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

THE BRONX FREEDOM FUND, INC

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization

Open to Public Inspection Employer identification number 26-1385792

Pa	rt I Organizations Maintaining Donor Adv		or Accounts.
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor	r advisors in writing that the assets hel	d in donor advised
	funds are the organization's property, subject to the		
6	Did the organization inform all grantees, donors, a	=	
	only for charitable purposes and not for the bene		
	conferring impermissible private benefit?		
Pa	rt II Conservation Easements.		
	Complete if the organization answered	l "Yes" on Form 990, Part IV, line 7	
1	Purpose(s) of conservation easements held by the	e organization (check all that apply)	
	Preservation of land for public use (e.g., rec	reation or education) Preservatio	n of a historically important land area
	Protection of natural habitat		n of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization h	eld a qualified conservation contribution	in the form of a conservation
	easement on the last day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easement	s	2b
C	Number of conservation easements on a certified	historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a	
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, train	nsferred, released, extinguished, or term	inated by the organization during the
	tax year >		-
4	Number of states where property subject to conse	ervation easement is located >	
5	Does the organization have a written policy re-		
	violations, and enforcement of the conservation ea	sements it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspec	cting, handling of violations, and enforcing co	onservation easements during the year
			
7	Amount of expenses incurred in monitoring, inspec	ting, handling of violations, and enforcing	conservation easements during the year
	▶ \$		
8	$\label{eq:conservation} \textbf{Does each conservation easement reported on line}$		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports		
	balance sheet, and include, if applicable, the text of		icial statements that describes the
_	organization's accounting for conservation easeme		
Pa	rt III Organizations Maintaining Collections Complete if the organization answered	s of Art, Historical Treasures, or Oth	er Similar Assets.
			· · · · · · · · · · · · · · · · · · ·
1a	If the organization elected, as permitted under S	FAS 116 (ASC 958), not to report in its	revenue statement and balance sheet
	If the organization elected, as permitted under Si works of art, historical treasures, or other similar public service, provide, in Part XIII, the text of the form	ootnote to its financial statements that de	escribes these items
b	If the organization elected, as permitted under		
	works of art, historical treasures, or other similar	ar assets held for public exhibition, ec	fucation, or research in furtherance of
	public service, provide the following amounts relat		
	(i) Revenue included on Form 990, Part VIII, line 1		
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of a	rt, historical treasures, or other similar	r assets for financial gain, provide the
	following amounts required to be reported under S		
а	Revenue included on Form 990, Part VIII, line 1	• • • • • • • • • • • • • • • • • • • •	> \$
<u>b</u>	Assets included in Form 990, Part X		<u></u> \$

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2018

Page	

	rt III Organizations Maintaini	ng Collection	s of Art, Histo	rical Tre	asures.	or Other	Similar Ass	ets (continu		aye &			
3													
	collection items (check all that apply)												
а	Public exhibition d Loan or exchange programs												
b	Scholarly research		e	Other									
С	Scholarly research e Other Preservation for future generations												
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part												
	XIII												
5	During the year, did the organization	n solicit or rece	eive donations d	of art, histo	orical trea	sures, or	other similar						
	assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No												
Pa	Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form												
	990, Part X, line 21.												
1a	· · · · · · · · · · · · · · · · · · ·	e. custodian oi	r other intermed	diary for co	ontributio	ns or othe	r assets not						
	Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?												
b													
	Amount												
С	Beginning balance				1	С							
	Additions during the year					d							
е	Distributions during the year					e							
f	Ending balance					f		~					
2a	Did the organization include an am						account liabili	ty? Ye	s	No			
	If "Yes," explain the arrangement i									7			
	rt V Endowment Funds.			•,		<u> </u>							
	Complete if the organiza	ition answered	d "Yes" on For	m 990, P	Part IV, li	ne 10.							
		(a) Current yea	ar (b) Prio	or year	(c) Two y	ears back	(d) Three years	back (e) Fo	ur years	back			
1a	Beginning of year balance												
b	Contributions												
_	Net investment earnings, gains,								₩				
•	and losses												
d	Grants or scholarships												
	Other expenditures for facilities								•				
_	and programs												
f	Administrative expenses								-				
g	End of year balance												
2	Provide the estimated percentage		vear end balanc	e (line 1a.	column (a	a)) held as	:	•					
a	Board designated or quasi-endown		%	· · · · · · · · · · · · · · · · · · ·	(-,,	•						
b	Permanent endowment >	%											
С	Temporarily restricted endowment	>	_ %										
	The percentages on lines 2a, 2b, a	and 2c should e	qual 100%										
3a	Are there endowment funds not in	the possession	of the organiza	ation that	are held	and admii	nistered for the	•					
	organization by								Yes	No			
	(i) unrelated organizations							3a(i)				
	(ii) related organizations							3a(ii)				
b	If "Yes" on line 3a(ii), are the relate	ed organizations	s listed as requir	ed on Sch	edule R?			<u>3b</u>	<u> </u>				
4	Describe in Part XIII the intended in		anızatıon's endo	wment fur	nds								
Pa	rt VI Land, Buildings, and Equ Complete if the organize	uipment.	d "Yes" on Fo	rm QQA E	Part IV/ II	ne 11a	See Form 00	M Part Y I	ine 1∩)			
	Description of property		Cost or other basis		or other basis		cumulated	(d) Book		<u>,</u>			
			(investment)		ther)		eciation						
_	Land			ļ		+							
b	Buildings						<u> </u>						
	Leasehold improvements	-		<u> </u>									
d	Equipment						1 576	·-·		- 2 2			
	Other				5,115		1,576.			539.			
Tota	II. Add lines 1a through 1e (Column	(d) must equal	rorm 990, Part	X, column	i (B), line	10c)	▶		3,	539.			

Schedule D (Form 990) 2018			Page				
Part VII Investments - Other Securities.							
Complete if the organization answered	"Yes" on Form 990	, Part IV, line 11b See Form 990,	Part X, line 12.				
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuati Cost or end-of-year mark					
(1) Financial derivatives							
(2) Closely-held equity interests							
(3) Other			 				
(A)							
(B)							
(C)							
(D)		,					
(E)							
(F)			··· -				
(G)							
(H)							
Total (Column (b) must equal Form 990, Part X, col (B) line 12)		<u> </u>					
Part VIII Investments - Program Related. Complete if the organization answered	l "Ves" on Form 990	Part IV line 11c See Form 990	Part Y June 13				
							
(a) Description of investment	(b) Book value	(c) Method of valual Cost or end-of-year mark					
(4)							
(1)							
(3)							
(4)							
(5)							
(6)							
(7)	-						
(8)							
(9)							
Total (Column (b) must equal Form 990, Part X, col (B) line 13)			·				
Part IX Other Assets.	<u> </u>						
Complete if the organization answered	Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 99						
	(a) Description						
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
Total. (Column (b) must equal Form 990, Part X, col (B) I	ine 15)	<u> </u>					
	Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See F						
line 25.	i tes on Form 990	, Part IV, line The or Th. See For	m 990, Pan X,				
1. (a) Description of liability	(b) Book valu	le l					
(1) Federal income taxes		· ·					
(2)							
(3)		<u> </u>	-				
(4)		•					
(5)							
(6)							
(7)							
(8)			5				
(9)		7					

Schedule D (Form 990) 2018

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) ▶

^{2.} Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's hability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII. JSA 8E1270 1 000 0008PO L161 6/19/2020 9:17:00 AM V 18-8.6F

JSA 8E1271 1 000

Supplemental Information (continued)

SCHEDULE D, PART X LINE 2

THE BRONX FREEDOM FUND INC. IS SUBJECT TO THE PROVISIONS OF THE FINANCIAL ACCOUNTING STANDARDS BOARD'S ("FASB") ACCOUNTING STANDARDS CODIFICATION ("ASC") TOPIC 740, INCOME TAXES, AS IT RELATES TO ACCOUNTING AND REPORTING FOR UNCERTAINTY IN INCOME TAXES. DUE TO THE BRONX FREEDOM FUND'S GENERAL TAX-EXEMPT STATUS, MANAGEMENT BELIEVES ASC TOPIC 740 HAS NOT HAD, AND IS NOT EXPECTED TO HAVE, A MATERIAL IMPACT ON THE BRONX FREEDOM FUND'S FINANCIAL STATEMENTS.

SCHEDULE D, PART XII LINE 2D LOSS ON UNCOLLECTIBLE ACCOUNTS OF \$28,945

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www irs gov/form990.

Employer identification number 26-1385792

THE BRONX FREEDOM FUND, INC

FORM 990, PART III, LINE 4A

PROGRAM SERVICE ACCOMPLISHMENTS: THE BRONX FREEDOM FUND PROVIDES BAIL FOR INDIGENT CLIENTS WHO ARE ACCUSED OF MISDEMEANORS WITH BAIL SET AT \$2000 OR LESS AND WHO DO NOT HAVE THE MEANS TO POST BAIL ON THEIR OWN. THE FREEDOM FUND EMPOWERS ITS CLIENTS TO FIGHT THEIR CASE FROM A POSITION OF FREEDOM, RATHER THAN AWAIT TRIAL INDEFINITELY BEHIND BARS AWAY FROM THEIR FAMILIES AND COMMUNITIES.

IN THE FISCAL YEAR ENDING 6/30/2019, THE FREEDOM FUND BAILED OUT HUNDREDS OF NEW YORKERS, PREVENTING THEM FROM LOSING THEIR JOBS AND HOMES AND CONNECTING THEM TO LOCAL RESOURCES TO ADDRESS THE COLLATERAL EFFECTS OF THE CRIMINAL JUSTICE SYSTEM.

TECHNICAL ASSISTANCE: AS A PIONEER AMONG CHARITABLE BAIL FUNDS, WE PROVIDE TECHNICAL ASSISTANCE TO ADVOCATES AROUND NEW YORK CITY AND NATIONWIDE WHO ARE INTERESTED IN BUILDING OFF OF OUR MODEL. WE PROVIDED INFORMAL ASSISTANCE TO DOZENS OF SITES, AND HELPED FUNDS PAY THEIR FIRST BAILS IN MANHATTAN, CONNECTICUT, TENNESSEE, AND SEATTLE.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS REVIWED BY MANAGEMENT AND ANY QUESTIONS ARE ADDRESSED.

THE FORM IS MADE AVAILABLE TO THE BOARD MEMBERS PRIOR TO SUBMISSION TO

Carpelly

Employer identification number 26-1385792*

· THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C

ON AN ANNUAL BASIS, ALL MEMBERS OF THE BOARD OF DIRECTORS, OFFICERS, AND

KEY PERSONS MUST REVIEW AND SIGN AN ACKNOWLEDGEMENT OF THE BAIL

PROJECTS'S CONFLICT-OF-INTEREST POLICY AND REPORT ANY POTENTIAL

CONFLICTS.

FORM 990, PART VI, SECTION B, LINE 15

THE DIRECTOR'S COMPENSATION IS DETERMINED BY THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION C, LINE 19;

GOVERNING DOCUMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XI, LINE 9

LOSS ON UNCOLLECTIBLE AMOUNTS OF \$28,945